this, if and when the President declares a disaster.

I wanted to bring to my colleagues' attention the request the Governor of North Dakota has made. My expectation is the President will move quickly to respond to it, and my concern is that we do everything we can not only to deal with the issue of infrastructure damage to public buildings, and there is substantial damage in those areas roads, buildings, water and sewage systems-but also that we are able to be helpful to family farmers, many of whom have lost virtually all of their crops, crops they dutifully planted this spring with such great hope and now have been completely decimated by these sheet floods.

My colleagues and I who come from this region of the country will continue to work on all of these issues. We are joined by our colleagues from the State of Minnesota because all this occurs on the North Dakota-Minnesota border.

ENERGY

Mr. DORGAN. Madam President, I want to talk about the issue of energy supplies and the debate over energy. I noticed today a number of Senators came to the floor of the Senate, and they waved their arms and raised their voices a bit and railed about energy: Lord, we should know what is going on here, they say. We have the OPEC cartel, yes, but we also have an administration that does not have an energy policy, and woe is us.

This is not brain surgery. This is not complicated at all. We have a cartel called OPEC that controls a substantial amount of the oil that is exported to this country, and they decided to decrease production. When they did, prices began to go up.

More than that, we also have the largest oil companies in this country and around the world merging. Exxon, Amoco, BP, are all merging. We have larger oil companies and a circumstance of a cartel supplier, and now people who go to the gas pumps are paying higher and higher energy prices.

I do not hear any discussion about whether the energy companies may have played a role in this. Does anybody understand how, when you get larger, you also have the opportunity to manipulate prices? I think you do.

Is a major part of this problem the OPEC cartel? You bet your life it is. But I think another part of this problem is we do not understand pricing policies of energy companies that have become larger and larger. We need to know that. That is why I fully support the Federal Trade Commission's investigation, and why I believe the Justice Department ought to be part of the same investigation.

I find it interesting, as the oil companies become larger and continue to oppose ethanol production, Congress has

still not done nearly enough to promote the kind of energy supplies that are renewable—wind energy and others. We ought to get, in my judgment, a wake-up call from these oil prices that we are held hostage by the OPEC cartel. We are a growing economy and produce and use a substantial amount of energy, but we are far too dependent on OPEC countries.

If one looks at production of energy, it does not matter who is in the White House—a Republican or Democratic administration—we see that same line, and the line is not going up, it is marginally going down. We need an energy policy that is a Republican and Democratic energy policy, not one about which one side continues to wave and rail about the other side. We need a bipartisan energy strategy that recognizes this country should not be beholden to an OPEC cartel for its energy supplies. Not to do so means we put ourselves at risk, we put our economies at risk, and put the American people at risk when, in some cases, they cannot purchase the energy they need.

A PRESCRIPTION DRUG BENEFIT IN MEDICARE

Mr. DORGAN. Madam President, I want to talk about the subject that is going to be front and center in the Congress this week, the issue of a prescription drug benefit and Medicare. There are stories in today's papers—the Washington Post, the New York Times, and others—in which the chairman of the National Republican Congressional Committee is quoted as saying that there is a belief that his party, meaning Congressional Republicans, need to do something on the issue of prescription drugs. He says, "It's a great issue—no question it polls well."

Another member from the other side of the aisle said: "We're going to use the marketplace pressure to solve the problem, which is much better than the government program."

In other words, the majority party feels they have to bring a bill to the floor addressing the need for prescription drug coverage because the issue polls well. So they are going to bring an illusory bill to the floor of the House this week that requires private insurance companies to offer an insurance policy that helps people pay for their prescription drugs. The catch is that the insurance companies say they cannot offer such a policy. Officials from two companies have come to my office and told me that, to offer a policy with \$1,000 in benefits, it would cost \$1,200.

I come from a rural State. In rural States, a recent study shows that rural Medicare beneficiaries pay 25 percent more out-of-their own pockets for prescription drugs than do urban beneficiaries. Of course, rural areas are shrinking. Many have seen the movie

"Four Weddings and a Funeral." In rural areas of my State, ministers tell me they have four funerals for every wedding because the population is getting older and the younger people are moving out.

And those senior citizens living in rural areas are the ones who are paying the highest prices for prescription drugs.

And many of them cannot afford the drugs they need. They have heart trouble, diabetes, and a range of other problems. Their doctors say: You need to take this miracle medicine, this lifesaving drug, to help you live a better life. And they say to their doctors: I can't afford it.

We need to do two things. First, we need to add a prescription drug benefit to the Medicare program, and second, we need to put downward pressure on drug prices.

I thought I might, with my colleagues' consent, show on the floor of the Senate a couple of pill bottles that illustrate part of the problem. Here are two bottles for a prescription drug called Zocor used to lower cholesterol. This is the same tablet, in the same strength, made by the same company, probably made in the same manufacturing plant. If you buy Zocor in Canada, it costs \$1.82 per pill. But if you buy the same drug—the same pill, made by the same company—in the United States, it costs \$3.82 per pill.

Let me say that again. If you are a Canadian, you pay \$1.82 for Zocor; if you are an American, you pay \$3.82, more than twice as much. Why? Because the big drug manufacturers have decided they want to charge the American consumer more than twice as much.

One other example, if I might. Here are bottles of Zoloft. Zoloft is a common prescription drug used to fight depression. If you buy this medication in Canada—the same pill, in the same strength, by the same drug company—it costs \$1.28 per pill. But if you buy it in North Dakota, it costs \$2.34 per pill. The Canadian pays \$1.28; the American pays \$2.34, 83 percent more.

I have other examples, but I think you get the point: American consumers pay the highest prices in the world for their prescription drugs. These are the prices that our current marketplace have achieved. Why should an American citizen have to go to Canada to buy a drug that was produced in the United States in order to pay half the price that is charged in the United States? The answer is that they should not have to do that.

I think these examples illustrate why, when those on the other side of the aisle say "we're going to use the marketplace pressure to solve the problem," this marketplace approach just is not going to work. We need a real prescription drug benefit added to the Medicare program. What we do not